

Draw **Pharmacology** *in your mind*



**If you are a pharmacy student
If you are postgraduate and want
to revise pharmacology by an
easy way
If you are using any pharmacology
reference
this file will aid you
> And wait for more <**

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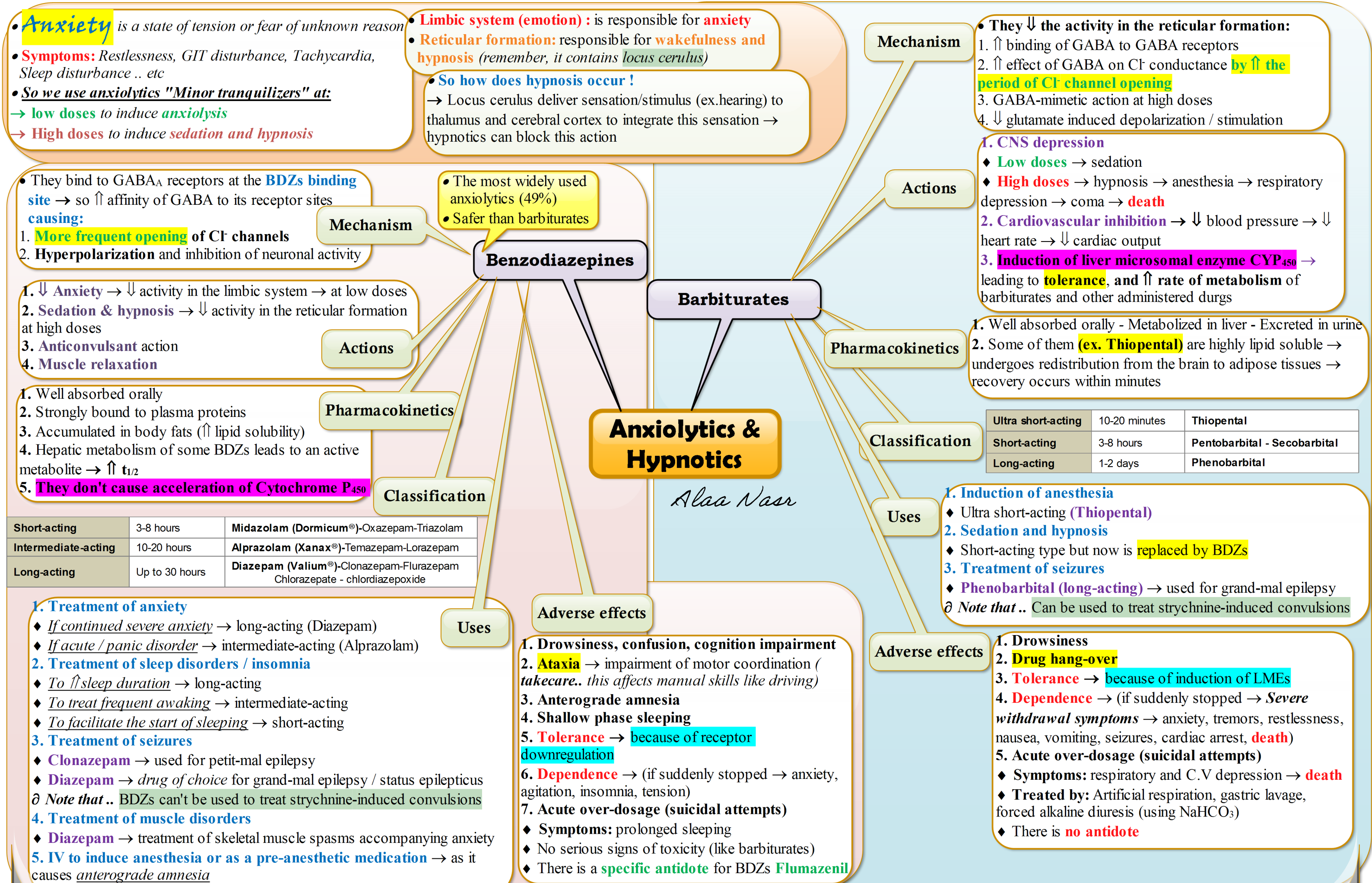
لا تتسوني من صالح دعائكم

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VISIT...

LANZAROTE
Caliente.COM



♦ **Example: Propranolol (Indral®)**

♦ They ↓ peripheral sympathetic responses associated with anxiety → ↓ physical symptoms → tachycardia, sweating, tremors → so **only considered as anxiolytics but not hypnotics**

♦ **Used in case of stage fright**



Beta blockers

5HT_{1A} agonists

Anxiolytics & Hypnotics

Alaa Nasr

♦ **Example: Buspirone (Buspar®)**

They interfere with arousal reactions

♦ **Differences from BDZs:**

1. **Don't** affect GABA receptors
2. **Don't** cause sedation, ataxia, or withdrawal symptoms

Side effects: Nausea, dizziness, headache



Hydroxyzine

Others

♦ **(Atarax®)**

- ♦ 1st generation antihistaminic with antiemetic properties
- ♦ **Used mainly now as sedative**
- ♦ Has tendency for habituation
- ♦ **Suitable** for patients with anxiety *having a history of drug abuse*



Zolpidem & Zaleplon

♦ **(Stilnox®) (Sleep aid®)**

- ♦ Potent non-BDZs hypnotics

Advantages

1. No muscle relaxing properties
2. Minimal rebound insomnia
3. No tolerance and withdrawal symptoms

Disadvantages

1. GIT disturbances
2. **Nightmares**
3. Headache and dizziness



Kava Kava



♦ **(Kava®)**

- ♦ Its action is through affecting GABA_A receptors in the brain
- ♦ It is **hepatotoxic** so should be discontinued in less than **2 months** even if it is effective